



Use in lieu of PTO/SB/17 (08-03)
(Form updated to reflect FY 2004 fees effective 10/1/03)

| FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small> | | Completion if Known | |
|--|--|----------------------|--------------------|
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 08/937756 |
| TOTAL AMOUNT OF PAYMENT (\$) | | Filing Date | September 25, 1997 |
| 55.00 | | First Named Inventor | David C. Rueger |
| | | Examiner Name | S. Turner |
| | | Art Unit | 1647 |
| | | Attorney Docket No. | JJJ-P06-504 |

| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | |
|--|--------------------------------------|---|--|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | 3. ADDITIONAL FEES | |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> Other | | |
| <input checked="" type="checkbox"/> Deposit Account: | | RECEIVED FEB 03 2004 TECH CENTER 1500/2210 | |
| Deposit Account Number: 18-1945 | | | |
| Deposit Account Name: Ropes & Gray LLP | | Fee Description | |
| The Director is authorized to: (check all that apply) | | Fee Paid | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | | <input checked="" type="checkbox"/> Credit any overpayments | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application | | | |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | |

| FEE CALCULATION | | | |
|----------------------------|--------------|------------------------|--|
| 1. BASIC FILING FEE | | | |
| Large Entity | Small Entity | | |
| Fee Code | Fee Code | | |
| Fee (\$) | Fee (\$) | | |
| Fee Description | Fee Paid | | |
| 1001 770 | 2001 385 | Utility filing fee | |
| 1002 340 | 2002 170 | Design filing fee | |
| 1003 530 | 2003 265 | Plant filing fee | |
| 1004 770 | 2004 385 | Reissue filing fee | |
| 1005 160 | 2005 80 | Provisional filing fee | |
| SUBTOTAL (1) (\$) | | 0.00 | |

| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | | |
|---|--------------|--|----------------|----------|
| Total Claims | -20** = | Extra Claims | Fee from below | Fee Paid |
| Independent Claims | -3** = | | | |
| Multiple Dependent | | | | |
| Large Entity | Small Entity | | | |
| Fee Code | Fee Code | Fee Description | | |
| Fee (\$) | Fee (\$) | | | |
| 1202 18 | 2202 9 | Claims in excess of 20 | | |
| 1201 86 | 2201 43 | Independent claims in excess of 3 | | |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid | | |
| 1204 86 | 2204 43 | ** Reissue independent claims over original patent | | |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent | | |
| SUBTOTAL (2) (\$) | | 0.00 | | |

| SUBMITTED BY | | (Complete if applicable) | |
|-------------------|----------------|-----------------------------------|------------------|
| Name (Print/Type) | Erika Takeuchi | Registration No. (Attorney/Agent) | P55,661 |
| Signature | | Telephone | (212) 497-3625 |
| | | Date | January 22, 2004 |

| | |
|---|---------------------------|
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER 986434730 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. | |
| Dated: January 22, 2004 | Signature: (Linda Blake) |